

7/02/04

AF 2878/#  
FR



Attorney Docket No.: 70139

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : DREYER et al.  
Serial No. : 09/878,259  
Confirm. No. : 2978  
Filed : June 11, 2001  
For : INFRARED OPTICAL...  
Art Unit : 2878  
Examiner : Shun K. Lee  
Dated : July 1, 2004

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

PETITION UNDER 37 CFR 1.136 (a)  
REQUEST TO CHARGE DEPOSIT ACCOUNT

Sir:

The Office Action dated March 3, 2004 provided for a shortened statutory period for response of three months.

The shortened statutory period expired June 3, 2004.

Since the attached response is being filed within the first month pursuant to 37 CFR 1.136(a) Examiner is respectfully requested to charge attorney's deposit account the appropriate petition fee of \$110.00 (fee code 1251).

Respectfully submitted  
for Applicant(s),

By:

John James McGlew

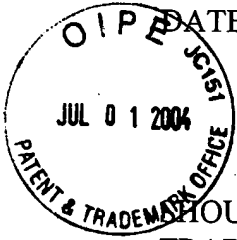
Reg. No.: 31,903

For: MCGLEW AND TUTTLE, P.C.

JJM:tf  
70139.16

07/08/2004 WASFAW1 00000130 130410 09878259

01 FC:1251 110.00 DA



DATED: July 1, 2004  
SCARBOROUGH STATION  
SCARBOROUGH, NEW YORK 10510-0827  
(914) 941-5600

SHOULD ANY OTHER FEE BE REQUIRED, THE PATENT AND  
TRADEMARK OFFICE IS HEREBY REQUESTED TO CHARGE SUCH FEE  
TO OUR DEPOSIT ACCOUNT 13-0410.

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING  
DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS EXPRESS  
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PATENTS, ALEXANDRIA, VA 22313-1450, NO. EV436440084US

McGLEW AND TUTTLE, P.C., SCARBOROUGH STATION,  
SCARBOROUGH, NEW YORK 10510-0827

BY: *Jonathan Forte* DATE: July 1, 2004



EV 436440084 US

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Date In Mo. Day Year	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage \$	Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Time In <input type="checkbox"/> AM <input type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee	Delivery Date	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Weight lbs. ozs.	Int'l Alpha Country Code	COD Fee Insurance Fee	<input type="checkbox"/> <b>WAIVER OF SIGNATURE (Domestic Only)</b> Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.		
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials	Total Postage & Fees \$	<input type="checkbox"/> <b>NO DELIVERY</b> <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		
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FROM: (PLEASE PRINT) <b>MC GLEW &amp; TUTTLE P.C.</b> <b>SCARBOROUGH STATION RD</b> <b>PO BOX 327</b> <b>SCARBOROUGH NY 10510-0827</b> PHONE <b>914 941 5600</b>			TO: (PLEASE PRINT) <b>COMMISSIONER FOR PATENTS</b> <b>PU BOX 1450</b> <b>ALEXANDRIA VA 22313-1450</b> PHONE ( )		
<b>PRESS HARD.</b> You are making 3 copies. <b>FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com</b>					

THURSDAY

JULY 1, 2004